PTO/SB/60 (04-05)
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1 hereby appoint:							
X Practition	oners associated with the Cu	istomer Numbe	er Number:				
Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):							
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any and all patent	agent(s) to represent the undersig t applications assigned <u>only</u> to the	e undersigned acc	niled States Pa	lent and Trad SPTO assign	demark Of	fice (USPTO) in co ords or assignment	onnection with documents
altached to this form in accordance with 37 CFR 3.73(b).  Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:							
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Assignee Name and Address:  ASUSTEK COMPUTER INC  4F, No 150, Li-Te Rd , Peitou, Taipei City, Taiwan, R.O.C.							
A copy of this form, together with a statement under 37 CFR 3 73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.							
SIGNATURE of Assignee of Record The individually-hose signature and title is supplied below is authorized to act on behalf of the assignee							
Signature	Slik, To	y Til		Date	OCT	1 6 2006	NAME III AMARA AND AND AND AND AND AND AND AND AND AN
Name	Tsung-Tang Shila			Telephon	е	+886-2- 28	194-3447
Title	President						